TRANSIENT REAL BLINDNESS IN HYSTERIA.*

By George C. Harlan, M.D., of Philadelphia.

Mrs. K. B., a delicate and nervous woman, 23 years of age, came to the Wills Hospital complaining of loss of vision in the left eye of three days' duration. She said that a month before there had been double vision in each eye, which lasted three weeks, and was succeeded a few days later by almost complete blindness in the left.

She had a good deal of frontal headache and intermittent pain in both eyes. The right eye had full vision and was normal in all respects. In the left vision was reduced to the ability to count fingers at four inches. A mydriatic had unfortunateley been used before I saw her and prevented investigation of the pupil, but the ophthalmoscopic appearances were quite normal, excepting, perhaps, a slight retinal hyperemia. Various prism and confusion tests failed to elicit any higher degree of vision than she at first admitted. There was decided inversion of the blue and red fields, as is shown by this chart, which was carefully taken by Dr. Zuill, and also concentric contraction.

At her next visit, three days later, there was absolute monocular blindness. No diplopia was produced by flame and prism. The application of the modified Grafe prism test, suggested but not correctly understood by v. Welz, viz., watching the behavior of the eyes behind a prism, seemed conclusive. The patient was directed to look at a flame, and a prism, base toward the temple, was placed before each eye alternately. When it was held before the blind eye there was no movement, whether the other was closed or open; but when it was placed before the right eye there was very evident deviation of both eyes to the left and recovery after removal of the prism.

I believe that this test is absolute, as the turning of the macula to the fixing point is practically a reflex act over which the subject has no control. Priestly Smith has suggested that it is applicable even when binocular blindness is simulated, and Dr. Jackson has shown that in binocular vision only the eye before which the prism is held deviates, as the other is fixed by the flame, while in monocular blindness both eyes deviate, as in this case, when the prism is held before the seeing one. Of course, in case of simulated monocular blindness, we determine in this way only the fact that the alleged blind eye has light perception; how much it can see must be discovered by other means.

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The patient did not return to the hospital for ten days, when she joyfully announced that the sight was rapidly returning to the blind eye, and easily read with it No. LXX. of Snellen's types at twenty feet. We had no further opportunity to study the case, as the patient disappeared. She probably recovered entirely, or turned up with a new set of symptoms at some other hospital.

It will hardly be questioned that this was a typically hysterical case; and I am equally satisfied that the eye was really and absolutely blind. It has interested me particularly because in a very considerable experience with cases of this kind I have met with but one other in which I have been unable to demonstrate that the blindness was not real, and have usually succeeded in making the patient read with the alleged blind eye.

In a paper read before the Philadelphia Neurological Society some years ago, I suggested that, from a clinical point of view, it seemed possible to divide these mysterious cases of so-called hysterical blindness into two classes. In some there seems to be a more or less deliberate deception, the result of a morbid craving for sympathy, or for personal importance, or of a motiveless freak of a disordered mind. The blindness may be considered a symptom of a kind of insanity—"ganglionic insanity," if you choose—as hysteria has been called. These patients are like the fasting girls who develop a superhuman ingenuity in the effort to make it appear that they live without eating.

Others seem to be quite honest and to be themselves deceived as thoroughly as they would deceive others. It is possible that though they see well enough unconsciously, they may not be capable of conscious vision. Our daily experience, when we use the microscope or ophthalmoscope with both eyes open, shows that, under certain conditions, the brain may take no notice of what the eye is seeing; or, rather, of the images formed upon a healthy retina with its nerve connections sound. Perception is in abeyance. Something similar may happen in the case of hysterical blindness. Just how or why, nobody knows. Call it "psychic" blindness, if you will; though that term is scarcely more explanatory than is hysterical.

I am half tempted now to add a third class, in which blindness is real and absolute, but transient, and without recognizable cause.

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27. "PSYCHOLOGICAL ATOMISM. Hugo Münsterberg (Psychological Review, Vol. 7, No. 1, Jan., 1900, p. 1-17).

This ingenious article will probably advance the science ultimately, in one way or another, more than will any other of its speculative achievements in months, for it is vital with the psychologic spirit of the hour—parallelistic, analytic, and scientific.

Having pointed out the success of analysis in the affective modes of consciousness as well as in the cognitional, the writer draws attention to the fact that in trying to determine the aspect of psychological correlation it is no longer the purely "material" or physical stimulus with which (as in Fechner's abandoned "law") the sensation is considered to be correlated, but that it is rather with that still indefinite commotion which is concomitant in the neural structure. "We have been too long satisfied with the hypothesis that the elementary stimulus of the outer world excites merely the physiological unit in the brain which is represented by the isolated ganglion cell. * * * * We are becoming more and more accustomed to the view that the most elementary stimulus brings about a nervous excitement which grows from the periphery to the center like an avalanche and stimulates in the brain a whole area which may overlap the area stimulated by another isolated excitement. * * * * As soon, therefore, as it is recognized that the brain-effect of the indivisible stimulus is an easily divisible physiolgical process, the sensation ceases to be the ultimate result of psychological analysis, since a still more elementary psychophysical unity can now be conceived as the last factor in the explanation."

"I am convinced," says the writer, "that the time has come when we need a psychological atomism just as much as an atomism of the physical universe." Professor Muensterberg's atoms then are elements which, while under the general conditions of consciousness, are different from our sensations, they are absolutely dissimilar to each other (for on such uniqueness alone can the empirical differences in the vividness of sensations depend); they can vary through all degrees of vividness; they are all co-ordinated, not being in special groups according to our different senses; and lastly, they by their manifoldness are the material out of which is built both the "so-called qualities" and the intensities of the sensations. All the differences in consciousness seem to Dr. Muensterberg explainable by the changes in vividness of his atoms.

"We must begin to see that the sensations are unsatisfactory as ultimate conceptions; and that they must be replaced by psychical atoms if psychology really desires to become worthy of its great older sisters, the natural sciences"—not, we presume, that the author deems psychology at present an unnatural science, or even that it is too largely metaphysical, if, possibly, too "mystical."

G. V. N. DEARBORN.